

**FY 2025 Budget Performance Review**  
**790 Veterinary Medical Examiners**

Version      Original  
 Lead Administrator:

Date submitted  
 Lead Financial Officer:

XX/XX/XXXX

**Agency Mission**

To protect the public by regulating the practice of veterinary medicine through licensure of veterinarians, veterinary and euthanasia technicians and investigation of complaints to ensure that licensees are practicing within the provisions of the law.

**Division and Program Descriptions**

**Note: Please define any acronyms used in program descriptions.**

**Division or Program Number and Name**

*Licensing, Enforcement and Recidivism*

**FY'24 Budgeted Department Funding By Source**

<b>Dept. #</b>	<b>Department Name</b>	<b>Appropriations</b>	<b>Federal</b>	<b>Revolving</b>	<b>Local<sup>1</sup></b>	<b>Other<sup>2</sup></b>	<b>Total</b>
1000001	General Administration			\$719,467			\$719,467
8800010	Data Processing			\$30,300			\$30,300
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$749,767</b>	<b>\$0</b>	<b>\$0</b>	<b>\$749,767</b>

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable for each department:

**FY'23 Carryover by Funding Source**

<b>Class Fund #</b>	<b>Carryover Class Fund Name</b>	<b>Appropriations</b>	<b>Federal</b>	<b>Revolving</b>	<b>Local<sup>1</sup></b>	<b>Other<sup>2</sup></b>	<b>Total</b>
N/A	Non-appropriated						\$0

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable:

**What changes did the agency make between FY'23 and FY'24?**

1.) Are there any services no longer provided because of budget cuts? NO

2.) What services are provided at a higher cost to the user?      Np fee increase since 2009

3.) What services are still provided but with a slower response rate?    None

4.) Did the agency provide any pay raises that were not legislatively/statutorily required?      NO

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**FY'25 Requested Funding By Department and Source**

Dept. #	Department Name	Appropriations	Federal	Revolving	Other <sup>1</sup>	Total	% Change
1000001	General Administration-Licensing/Enforcement	\$0	\$0	\$719,467	\$0	\$719,467	0.00%
8800010	Data Processing	\$0	\$0	\$30,300	\$0	\$30,300	0.00%
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$749,767</b>	<b>\$0</b>	<b>\$749,767</b>	<b>0.00%</b>

1. Please describe source(s) and % of total of "Other" funding for each department:

**FY'25 Top Five Operational Appropriation Funding Requests**

Request by Priority	Request Description	Appropriation Request Amount (\$)
Request 1:	N/A	
Request 2:		
Request 3:		
Request 4:		
Request 5:		
	Top Five Request Subtotal:	\$0
<b>Total Increase above FY-24 Budget (including all requests)</b>		#REF!
Difference between Top Five requests and total requests:		#REF!
<b>Does the agency have any costs associated with the Pathfinder retirement system and federal employees?</b>		
No federal employees		

**How would the agency be affected by receiving the same appropriation for FY '25 as was received in FY '24? (Flat/ 0% change)**

Non appropriated

**How would the agency handle a 2% appropriation reduction in FY '25?**

N/A

**Is the agency seeking any fee increases for FY '25?**

	Fee Increase Request (\$)	Statutory change required? (Yes/No)
Increase 1 None		
Increase 2		
Increase 3		

**What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?**

Description of request in order of priority	Appropriated Amount (\$)	Submitted to LRCPC? (Yes/No)
Priority 1 N/A		
Priority 2		
Priority 3		

**Federal Funds**

CFDA	Federal Program Name	Agency Dept. #	FY 24 budgeted	FY 23	FY 22	FY 21	FY 20
N/A	Non-Appropriated						

**Federal Government Impact**

**1.) How much federal money received by the agency is tied to a mandate by the Federal Government?**

N/A

**2.) Are any of those funds inadequate to pay for the federal mandate?**

N/A

**3.) What would the consequences be of ending all of the federal funded programs for your agency?**

N/A

**4.) How will your agency be affected by federal budget cuts in the coming fiscal year?**

N/A

**5.) Has the agency requested any additional federal earmarks or increases?**

N/A

**FY 2024 Budgeted FTE**

Division #	Division Name	Supervisors	Non-Supervisors	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$100K	\$100K+
1000001	General Administration	1		0.25		1	2
<b>Total</b>		1	0	0.25		1	2
							0

**FTE History by Fiscal Year**

Division #	Division Name	FY 2024 Budgeted	FY 2024 YTD	FY 2023	FY 2022	FY 2021	FY 2016
1000001	General Administration	3.3	3.3	2.3	3.3	4.5	5.0
<b>Total</b>		3.3	3.3	2.3	3.3	4.5	5.0

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## Performance Measure Review

	FY 2023	FY 2022	FY 2021	FY 2020	FY 19
Program Name					

## Revolving Funds (200 Series Funds)

<i>Please provide fund number, fund name, description, and revenue source</i>	<i>FY'21-23 Avg. Revenues</i>	<i>FY'21-23 Avg. Expenditures</i>	<i>June '23 Balance</i>
<b>Fund number:</b> Fund name			
<i>Licensing and Enforcement</i>	\$539,367	\$505,648	\$639,332
	<i>from SRD (net of 10% to Gen Rev)</i>	<i>from BTA</i>	
	2021 \$506,660 2022 \$561,004 2023 \$550,436 \$1,618,100	2021 \$463,656 2022 \$504,761 2023 \$548,527 \$1,516,944	

FY 2024 Current Employee Telework Summary

*List each agency location, then report the number of employees associated with that location in the teleworking categories indicated. Use "No specified location" to account for remote employees not associated with a site. Use actual current employees (headcount), not budgeted or actual FTF*

**Full-time and Part-time Employees (#)**